

Addiction (Alcohol and Substance Abuse): Myths and Facts

Myth #1: Drug addiction is voluntary behavior.

FACT: A person starts out as an occasional drug user, and that is a voluntary decision. But as times passes, something happens, and that person goes from being a voluntary drug user to being a compulsive drug user. Why? Because over time, continued use of addictive drugs changes your brain -- at times in dramatic, toxic ways, at others in more subtle ways, but virtually always in ways that result in compulsive and even uncontrollable drug use.

Myth #2: More than anything else, drug addiction is a character flaw.

FACT: Drug addiction is a brain disease. Every type of drug of abuse has its own individual mechanism for changing how the brain functions. But regardless of which drug a person is addicted to, many of the effects it has on the brain are similar: they range from changes in the molecules and cells that make up the brain, to mood changes, to changes in memory processes and in such motor skills as walking and talking. And these changes have a huge influence on all aspects of a person's behavior. The drug becomes the single most powerful motivator in a drug abuser's existence. He or she will do almost anything for the drug. This comes about because drug use has changed the individual's brain and its functioning in critical ways.

Myth #3: You have to want drug treatment for it to be effective.

FACT: Virtually no one wants drug treatment. Two of the primary reasons people seek drug treatment are because the court ordered them to do so, or because loved ones urged them to seek treatment. Many scientific studies have shown convincingly that those who enter drug treatment programs in which they face "high pressure" to confront and attempt to surmount their addiction do comparatively better in treatment, regardless of the reason they sought treatment in the first place.

Myth #4: Treatment for drug addiction should be a one-shot deal.

FACT: Like many other illnesses, drug addiction typically is a chronic disorder. To be sure, some people can quit drug use "cold turkey," or they can quit after receiving treatment just one time at a rehabilitation facility. But most of those who abuse drugs require longer-term treatment and, in many instances, repeated treatments.

Myth #5: We should strive to find a "magic bullet" to treat all forms of drug abuse.

FACT: There is no "one size fits all" form of drug treatment, much less a magic bullet that suddenly will cure addiction. Different people have different drug abuse-related problems. And they respond very differently to similar forms of treatment, even when they're abusing the same drug. As a result, drug addicts need an array of treatments and services tailored to address their unique needs.



Myth #6: People don't need treatment. They can stop using drugs if they really want to.

FACT: It is extremely difficult for people addicted to drugs to achieve and maintain long-term abstinence. Research shows long-term drug use actually changes a person's brain function, causing them to crave the drug even more, making it increasingly difficult for the person to quit. Especially for adolescents, intervening and stopping substance abuse early is important, as children become addicted to drugs much faster than adults and risk greater physical, mental and psychological harm from illicit drug use.

Myth #7: Treatment just doesn't work.

FACT: Treatment can help people. Studies show drug treatment reduces drug use by 40 to 60 percent and can significantly decrease criminal activity during and after treatment. There is also evidence that drug addiction treatment reduces the risk of HIV infection (intravenous - drug users who enter and stay in treatment are up to six times less likely to become infected with HIV than other users) and improves the prospects for employment, with gains of up to 40 percent after treatment.

Myth #8: Nobody will voluntarily seek treatment until they hit 'rock bottom.

FACT: There are many things that can motivate a person to enter and complete substance abuse treatment before they hit "rock bottom." Pressure from family members and employers, as well as personal recognition that they have a problem; can be powerful motivating factors for individuals to seek treatment. For teens, parents and school administrators are often driving forces in getting them into treatment once problems at home or in school develop but before situations become dire. Seventeen percent of adolescents entering treatment in 1999 were self-or individual referrals, while 11 percent were referred through schools.

Myth #9: You can't force someone into treatment.

FACT: Treatment does not have to be voluntary. People coerced into treatment by the legal system can be just as successful as those who enter treatment voluntarily. Sometimes they do better, as they are more likely to remain in treatment longer and to complete the program. In 1999, over half of adolescents admitted into treatment were directed to do so by the criminal justice system.